Applicant: Lyla Clemenson Serial No.: Filed:	Attorney's Docket No: 5832
For: STUMP CUTTING DOUBLE CLAW TOOTH STRUCTU	RE
As a pelow hames inventor, I hereby declare that inventor as defined in 37 CFR 1.9(c) for purpose section 41(d) and (b) of Title 35, United States Trademark Office with regard to the invention en DOUBLE CLAW TOOTH STRUCTURE) CLAIMING SMALL ENTITY) - INDEPENDENT INVENTOR I qualify as an independent s of paying reduced fees unde
<pre>[X] the specification filed herewith [] application S.N, filed</pre>	
I have not assigned, granted, conveyed or license under contract or law to assign, grant, convey or invention to any person who could not be classiff under 37 CFR 1.9(c) if that person had made the which would not qualify as a small business concerning or or or or concerning to the concerning of the	ed and am under no obligation of license, any rights in the lied as an independent invento invention, or to any concernern under 37 CFR 1.9(d) or a
convey, or license any rights in the invention is	listed below:
[] no such person, concern, or organizati[] persons, concerns or organization list	on ed below*
*NOTE: Separate verified statements are req person, concern or organization having right to their status as small entities. (37 CFR FULL NAME ADDRESS	uired from each named s to the invention averring 1.27)
FULL NAME	[] Nonprofit Organizatio
ADDRESS [] Individual [] Small Business Concern	Nonprofit Organizatio
FULL NAME	·
[] Individual [] Small Business Concern	Nonprofit Organizatio
I acknowledge the duty to file, in this application of any change in status resulting in loss of entity prior to paying, or at the time of paying, the earn any maintenance fee due after the date on which stands to longer appropriate. (37 CFR 1.28(b))	on or patent, notification lement to small entity statu
I hereby declare that all statements made herein of and that all statements made on information and be true; and further that these statements were made willful false statements and the like so made are prisonment, or both, under section 1001 of Title 1 and that such willful false statements may jeopard application, any patent issuing thereon, or any payorified statement is directed.	with the knowledge that punishable by fine or im- 8 of the United States Code,
Lyle Clemenson NAME OF INVENTOR NAME OF INVENTOR	NAME OF INVENTOR
Signature of Inventor Signature of Inven	tor Signature of Invento
1/20/91	

Date

Date

As a below named inventor, I hereby decla

Post Office Address _



My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first an names are listed below) of the same STUMP CUTTING DO	d sole inventor (if only one namulicity in atterwhich is claime DUBLE CLAW TOOTH S'	oe is listed below) or an orig d and for which a patent TRUCTURE	inal, first and joint in is sought on the in , the specifi	nventor (if plural ention entitled cation of which
(check one) & is attached hereto.				AS
- Application Senal	No			(if applicable).
I hereby state that I have reviewed; by any amendment referred to abo	and understand the contents of il	ne above identified specificat	tion, including the cla	ims, as amended
I acknowledge the duty to disclose Code of Federal Regulations, \$1.5	information which is material re	the examination of this ap	plication in accordan	ce with Title 37,
I hereby claim foreign priority bene certificate listed below and have als before that of the application on v	so identified below any foreign a	s Code, §119 of any foreign application for patent or inv	application(s) for pate entor's certificate hav	ent or inventor's ring a filing date
Prior Foreign Application(s)			Prior	rity Claimed
(Number)	(Country)	(Day/Month/Year Fi	led) Yo	cs No
(Number)	(Country)	(Day/Month/Year Fi	led) Ye	cs No
(Number)	(Country)	(Day/Month/Year Fi	led) Ye	cs No
(Application Serial No.)	(Filing Date)	(Sta	tus—patented, pendi	ng, abandoned)
(Application Serial No.)	(Filing Date)	(Sta	tus-patented, pendir	ng, abandoned)
I hereby appoint the following attor Frademark Office connected theres	ney(s) and/or agent(s) to prosec with:	ute this application and to t	ransact all business in	the Patent and
Leo Gregory	Reg. No. <u>18</u>	301		
Address all telephone calls to Address all correspondence to	Reif and Gregory	at telephone no (612) 333 752	
	Leo Gregory	,		
	1500 Rand Tower Minneapolis, MN.,	55402		
				•
I hereby declare that all statements belief are believed to be true; and fine so made are punishable by fine such willful false statements may journal than the of sole of first inventor	urther that these statements wer : or imprisonment, or both, unc :opardize the validity2of the app	e made with the knowledge Jer Section 1001 of Title 18	that willful false star of the United States	cinents and the
Inventor's signature A.	- themeun	Date X 4/2	5/96	
Residence		Citizenship <u>U.S.</u>	Λ	•
Post-Office Address 100 5	Klyn Par B. M.	<u> 455444</u>	•	
Full name of second joint inventor				
Second Inventor's signature	. ,	Date		
Residence		Citizenship		